BP-S148.055 INMATE REQUEST TO STAFF CDFRM SEP 98

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

TO: (Name and Title of Staff Member) MS_ GREEN	DATE: 1/116/27	
FROM: GAN XIANBING	REGISTER NO.:	
WORK ASSIGNMENT:	UNIT: 5752	
SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.) Please provide my we following form:		
· PATTERN Sort		
FSA Needs Reassessment		
· Forms PTO (WSP		
TOTAL TOTAL		
Also, am I eligible to apply FTCs to early release? If not, please		
ceract may		
(Do not write below this line)		
DISPOSITION:		
You are ineligible. You have a		
ICE Detainer.		
See Attenched		

Date

Record Copy - File; Copy - Inmate (This form may be replicated via WP)

Signature Staff Member

This form replaces BP-148.070 dated Oct 86 and BP-S148.070 APR 94